

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Massachusetts Republican State Congressional Committee

ADDRESS (number and street)

85 Merrimac Street, Suite 400

☐Check if different  
than previously  
reported. (ACC)

Boston

MA

02114

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00042622

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☒

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

03

01

2007

through

03

31

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Brent Andersen

Signature of Treasurer

Electronically Filed by Brent Andersen

Date

04

19

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Massachusetts Republican State Congressional Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2007</span>		11950.90
(b) Cash on Hand at Beginning of Reporting Period .....	25336.49	
(c) Total Receipts (from Line 19) .....	79097.15	200566.37
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	104433.64	212517.27
7. Total Disbursements (from Line 31) .....	78831.17	186914.80
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	25602.47	25602.47
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Massachusetts Republican State Congressional Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	45270.00	134570.00
(ii) Unitemized .....	31158.17	61514.17
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	76428.17	196084.17
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	720.00	770.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤	77148.17	196854.17
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	1948.98	1948.98
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	1763.22
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	79097.15	200566.37
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	79097.15	200566.37

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	56119.02	134699.99
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	56119.02	134699.99
22. Transfers to Affiliated/Other Party Committees.....	5000.00	10000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	17712.15	42214.81
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	17712.15	42214.81
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	78831.17	186914.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	78831.17	186914.80

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	77148.17	196854.17
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	77148.17	196854.17
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	56119.02	134699.99
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	1948.98	1948.98
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	54170.04	132751.01

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 / 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

**A.**

Full Name (Last, First, Middle Initial)

Ariel Acuna

Mailing Address 14 Windemere Road

City

Wellesley

State

MA

Zip Code

02481

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LTG Capital LLC

Occupation

Financial Advisor

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 3 / 2 0 0 7

Transaction ID: 70316.C164271

Amount of Each Receipt this Period

200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Robert Ahlstrom

Mailing Address 34 Washington St

City

Bedford

State

MA

Zip Code

01730

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Engineer

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 1 / 2 0 0 7

Transaction ID: 70312.C163915

Amount of Each Receipt this Period

200.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Randolph Barton

Mailing Address 20 Oak Street

City

Beverly

State

MA

Zip Code

01915

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Corn Bay Associates

Occupation

Trustee

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 8 / 2 0 0 7

Transaction ID: 70312.C164180

Amount of Each Receipt this Period

200.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Martin Begien Mailing Address 407 Warren Street City State Zip Code Brookline MA 02445 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 7 <b>Transaction ID:</b> 70316.C164506 Amount of Each Receipt this Period 1000.00 Receipt
<b>B.</b> Full Name (Last, First, Middle Initial) George Bennett Mailing Address 712 Main St. City State Zip Code Hingham MA 02043-3327 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer None Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 6 / 2 0 0 7 <b>Transaction ID:</b> 70312.C164033 Amount of Each Receipt this Period 200.00 Receipt
<b>C.</b> Full Name (Last, First, Middle Initial) George Berry Mailing Address 133 Weston Rd. City State Zip Code Lincoln MA 01773 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 1 / 2 0 0 7 <b>Transaction ID:</b> 70312.C163914 Amount of Each Receipt this Period 500.00 Receipt

SUBTOTAL of Receipts This Page (optional) .....

1700.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

**A.** Ann Blackham

Mailing Address 60 Swan Road

City State Zip Code  
 Winchester MA 01890

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Coldwell Banker

Occupation  
Real Estate Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70409.C164752

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

**B.** David Brown

Mailing Address PO BOX 672

City State Zip Code  
 Hyannis Port MA 02647

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Brown & Tarantino

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70409.C164772

Amount of Each Receipt this Period

500.00

Receipt

Full Name (Last, First, Middle Initial)

**C.** John Cabot

Mailing Address 1 Tucks Point Road

City State Zip Code  
 Manchester MA 01944

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Philanthropist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 9 / 2 0 0 7

Transaction ID: 70409.C164936

Amount of Each Receipt this Period

2500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

**A.** Full Name (Last, First, Middle Initial)

Eugene Cassis

Mailing Address 11 Dover Drive

City State Zip Code  
 Walpole MA 02081

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Waters Inc

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70409.C164764

Amount of Each Receipt this Period

250.00

Receipt

**B.** Full Name (Last, First, Middle Initial)

Lawrence Cohn

Mailing Address 45 Single Tree Road

City State Zip Code  
 Chestnut Hill MA 02467

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Brigham & Womens Hospital

Occupation  
Cardiac Surgeon

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70409.C164742

Amount of Each Receipt this Period

1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)

Nelson Darling

Mailing Address 74 Beach Bluff Ave.

City State Zip Code  
 Swampscott MA 01907

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 3 / 2 0 0 7

Transaction ID: 70316.C164346

Amount of Each Receipt this Period

250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)

Stephen Doucette

Mailing Address 105 Blood Rd.

City State Zip Code  
 Charlton MA 01507

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Doucette & LaRose, LLC

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 3 / 2 0 0 7

Transaction ID: 70316.C164280

Amount of Each Receipt this Period

100.00

Receipt

B. Full Name (Last, First, Middle Initial)

Stephen Doucette

Mailing Address 105 Blood Rd.

City State Zip Code  
 Charlton MA 01507

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Doucette & LaRose, LLC

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 7 / 2 0 0 7

Transaction ID: 70409.C164791

Amount of Each Receipt this Period

100.00

Receipt

C. Full Name (Last, First, Middle Initial)

William Edgerly

Mailing Address 32 Highland St

City State Zip Code  
 Cambridge MA 02138

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Street bank & Trust

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 2 / 2 0 0 7

Transaction ID: 70316.C164250

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

400.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Richard Frisbie Mailing Address 128 Beacon Street Unit H City Boston State MA Zip Code 02116-1501 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Battery Ventures Occupation Venture Capital Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 08 / 2007 <b>Transaction ID:</b> 70312.C164206 Amount of Each Receipt this Period 1000.00 Receipt
<b>B.</b> Full Name (Last, First, Middle Initial) M. Dozier Gardner Mailing Address 100 Upland Road City Brookline State MA Zip Code 02445 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cambridge Associates Occupation Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 01 / 2007 <b>Transaction ID:</b> 70312.C163948 Amount of Each Receipt this Period 1000.00 Receipt
<b>C.</b> Full Name (Last, First, Middle Initial) Richard Gaylord Mailing Address 207 Granville Road City Westfield State MA Zip Code 01085 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00		Date of Receipt MM / DD / YYYY 03 / 26 / 2007 <b>Transaction ID:</b> 70409.C164754 Amount of Each Receipt this Period 100.00 Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

2100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Henry Hall Mailing Address 22 Randolph Street City Belmont State MA Zip Code 02478 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 1 / 2 0 0 7 <b>Transaction ID:</b> 70312.C163949 Amount of Each Receipt this Period 500.00 Receipt
<b>B.</b> Full Name (Last, First, Middle Initial) George Hoguet Mailing Address 17 Chesam Rd. City Brookline State MA Zip Code 02146 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer State Street Global Advisors Occupation Portfolio Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 7 / 2 0 0 7 <b>Transaction ID:</b> 70409.C164789 Amount of Each Receipt this Period 750.00 Receipt
<b>C.</b> Full Name (Last, First, Middle Initial) Amory Houghton, Jr. Mailing Address 80 East Market Street Suite 300 City Corning State NY Zip Code 14830 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5100.00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 7 <b>Transaction ID:</b> 70316.C164554 Amount of Each Receipt this Period 5000.00 Receipt

SUBTOTAL of Receipts This Page (optional) .....

6250.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Dorothy Jenney Mailing Address 70 Landfall City Falmouth State MA Zip Code 02540 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00		Date of Receipt MM / DD / YYYY 03 / 26 / 2007 <b>Transaction ID:</b> 70409.C164773 Amount of Each Receipt this Period 200.00 Receipt
<b>B.</b> Full Name (Last, First, Middle Initial) Kevin Landry Mailing Address 250 Boylston St. #6 City Boston State MA Zip Code 02116 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer TA Assoc Occupation Mgr Director & CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 15000.00		Date of Receipt MM / DD / YYYY 03 / 06 / 2007 <b>Transaction ID:</b> 70312.C164007 Amount of Each Receipt this Period 15000.00 Receipt
<b>C.</b> Full Name (Last, First, Middle Initial) Kevin Landry Mailing Address 250 Boylston St. #6 City Boston State MA Zip Code 02116 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer TA Assoc Occupation Mgr Director & CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 15000.00		Date of Receipt MM / DD / YYYY 03 / 27 / 2007 <b>Transaction ID:</b> 70409.C164787 Amount of Each Receipt this Period -5000.00 Memo <b>[MEMO ITEM]</b> Kevin Landry, transfer of excess contrib from fed to non-fed

SUBTOTAL of Receipts This Page (optional) .....

15200.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Beth Lindstrom Mailing Address 161 Wharton Row City Groton State MA Zip Code 01450 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer None Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00			Date of Receipt MM / DD / YYYY 03 / 13 / 2007 <b>Transaction ID:</b> 70316.C164257 Amount of Each Receipt this Period 200.00 Receipt
<b>B.</b> Full Name (Last, First, Middle Initial) Michael Loucks Mailing Address 100 Fulton Street #5V City Boston State MA Zip Code 02109 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Department of Justice Occupation Federal Prosecutor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt MM / DD / YYYY 03 / 15 / 2007 <b>Transaction ID:</b> 70316.C164466 Amount of Each Receipt this Period 1000.00 Receipt
<b>C.</b> Full Name (Last, First, Middle Initial) Robert McCaffrey Mailing Address 220 Boylston St. Apt. 1108 City Boston State MA Zip Code 02116 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 125.00			Date of Receipt MM / DD / YYYY 03 / 06 / 2007 <b>Transaction ID:</b> 70312.C164107 Amount of Each Receipt this Period 125.00 Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

1325.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Robert McCaffrey		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 3 / 2 0 0 7
Mailing Address 220 Boylston St. Apt. 1108		<b>Transaction ID:</b> 70316.C164275
City Boston	State MA	Zip Code 02116
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer Retired	Occupation Retired	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Lawrence McCully		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 6 / 2 0 0 7
Mailing Address 174 Tracy Ave		<b>Transaction ID:</b> 70312.C164008
City Lynn	State MA	Zip Code 01902
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer GE - Aviation	Occupation Engineering Specialist	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Paul Michitson		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 1 / 2 0 0 7
Mailing Address 12 Nancy Ann Lane		<b>Transaction ID:</b> 70312.C163950
City Merrimac	State MA	Zip Code 01860
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

**SUBTOTAL** of Receipts This Page (optional) .....

425.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Shirley Perry Mailing Address 27 Lathrop Rd. City State Zip Code Wellesley MA 02482 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer At Home Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 2 / 2 0 0 7 <b>Transaction ID:</b> 70316.C164252 Amount of Each Receipt this Period 200.00 Receipt
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Reynolds Mailing Address 153 Garfield Road City State Zip Code Concord MA 01742 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Fidelity Investments Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 7 <b>Transaction ID:</b> 70312.C164179 Amount of Each Receipt this Period 10000.00 Receipt
<b>C.</b> Full Name (Last, First, Middle Initial) Clark Smith Mailing Address 101 Federal ST., STE. 1900 City State Zip Code Boston MA 02110 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 7 <b>Transaction ID:</b> 70316.C164507 Amount of Each Receipt this Period 500.00 Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

10700.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

**A.** Full Name (Last, First, Middle Initial)

Mimi Sundstrom

Mailing Address 66 Allerton Rd.

City State Zip Code  
Milton MA 02186

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 8 / 2 0 0 7

Transaction ID: 70312.C164213

Amount of Each Receipt this Period

250.00

Receipt

**B.** Full Name (Last, First, Middle Initial)

Mimi Sundstrom

Mailing Address 66 Allerton Rd.

City State Zip Code  
Milton MA 02186

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 5 / 2 0 0 7

Transaction ID: 70316.C164565

Amount of Each Receipt this Period

20.00

Receipt

**C.** Full Name (Last, First, Middle Initial)

Arthur Turner

Mailing Address PO Box 543

City State Zip Code  
Carlisle MA 01741

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 3 / 2 0 0 7

Transaction ID: 70316.C164272

Amount of Each Receipt this Period

200.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

470.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 45

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

**A.** Arthur Turner

Mailing Address PO Box 543

City	State	Zip Code
Carlisle	MA	01741

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	3	/	2	0	0	7

Transaction ID: 70316.C164375

Amount of Each Receipt this Period

200.00

Receipt

Full Name (Last, First, Middle Initial)

**B.** John Veasey

Mailing Address 88 Brockton Ave

City	State	Zip Code
Haverhill	MA	01830

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cedardale Inc.Occupation  
Owner/Operator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	3	/	2	0	0	7

Transaction ID: 70316.C164258

Amount of Each Receipt this Period

200.00

Receipt

Full Name (Last, First, Middle Initial)

**C.** Richard Whiting

Mailing Address 67 Park Slope

City	State	Zip Code
Holyoke	MA	01040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	9	/	2	0	0	7

Transaction ID: 70409.C164958

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

600.00

TOTAL This Period (last page this line number only) .....

45270.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 45

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)

Committee to Elect James Parker

Mailing Address 42 Sherricks Farm Road

City State Zip Code  
Weymouth MA 02188

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 7

Transaction ID: 70316.C164601

Amount of Each Receipt this Period

20.00

Receipt

B. Full Name (Last, First, Middle Initial)

Committee to Elect Jeff Beatty

Mailing Address P.O. Box 1599

City State Zip Code  
Harwich MA 02645

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 7

Transaction ID: 70316.C164602

Amount of Each Receipt this Period

100.00

Receipt

C. Full Name (Last, First, Middle Initial)

Committee to Elect Kevin Matthews

Mailing Address 137 Haynes Rd.

City State Zip Code  
Sudbury MA 01776-1344

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 7

Transaction ID: 70316.C164600

Amount of Each Receipt this Period

20.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

140.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 45

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Committee to Elect Robert Hedlund		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 7
Mailing Address Robert Hedlund INCORRECT ADDY		<b>Transaction ID:</b> 70316.C164576
City Weymouth State MA Zip Code 02188		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer	Occupation OCPF 11677	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Committee to Elect Robert Hedlund		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 7
Mailing Address Robert Hedlund INCORRECT ADDY		<b>Transaction ID:</b> 70316.C164575
City Weymouth State MA Zip Code 02188		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer	Occupation OCPF 11677	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 40.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Committee to Re-Elect George Peterson		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 1 / 2 0 0 7
Mailing Address P.O. Box 274		<b>Transaction ID:</b> 70312.C163983
City Grafton State MA Zip Code 01519		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Committee	Occupation 12408	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**SUBTOTAL** of Receipts This Page (optional) .....

540.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 45

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)  
Phil Paleologos Committee

Mailing Address 368 Whitlowse

City State Zip Code  
New Bedford MA 02746

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
14533

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 8 / 2 0 0 7

Transaction ID: 70312.C164241

Amount of Each Receipt this Period

40.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

40.00

TOTAL This Period (last page this line number only) .....

720.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 45

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

**A.** Full Name (Last, First, Middle Initial)

Brandon Barber

Mailing Address 106 Kendall Pond Rd.

City State Zip Code  
 Windham NH 03087-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

649.66

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 5 / 2 0 0 7

Transaction ID: 70409.C164761

Amount of Each Receipt this Period

649.66

Offsets to Operating Expe-  
nditu

**B.** Full Name (Last, First, Middle Initial)

Ladd Moore

Mailing Address 51 Phillips St. Apt. # 1

City State Zip Code  
 Boston MA 02114-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.83

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 5 / 2 0 0 7

Transaction ID: 70409.C164762

Amount of Each Receipt this Period

324.83

Offsets to Operating Expe-  
nditu

**C.** Full Name (Last, First, Middle Initial)

Jinara Reyes

Mailing Address 66 Greenleaf St.  
Apt. # 33

City State Zip Code  
 Quincy MA 02169-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MassGOP

Occupation  
Fundraising/Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.83

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 5 / 2 0 0 7

Transaction ID: 70409.C164760

Amount of Each Receipt this Period

324.83

Offsets to Operating Expe-  
nditu

**SUBTOTAL** of Receipts This Page (optional) .....

1299.32

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 45

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

**A.**

Full Name (Last, First, Middle Initial)

Priscilla Ruzzo

Mailing Address 85 Overlook Road

City

Boston

State

MA

Zip Code

02132-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

649.66

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 5 / 2 0 0 7

Transaction ID: 70409.C164763

Amount of Each Receipt this Period

649.66

Offsets to Operating Expe-  
nditu

**SUBTOTAL** of Receipts This Page (optional) .....

649.66

**TOTAL** This Period (last page this line number only) .....

1948.98

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 24 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

**A.** Rhonda Avola

Mailing Address 306 Main St. Unit 10

City  
Melrose

State  
MA

Zip Code  
02176-

Purpose of Disbursement  
ADMINISTRATION SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 70312.E9628

Date of Disbursement

/   /

Amount of Each Disbursement this Period

990.00

ADMINISTRATION SERVICE

Full Name (Last, First, Middle Initial)

**B.** Patton Boggs LLP

Mailing Address 2550 M. St. N.W.

City  
Washington

State  
DC

Zip Code  
20037-

Purpose of Disbursement  
LEGAL FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 70409.E9671

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2220.49

LEGAL FEE

Full Name (Last, First, Middle Initial)

**C.** Maeve Bowman

Mailing Address 404 Commercial St. Apt 2

City  
Boston

State  
MA

Zip Code  
02109-

Purpose of Disbursement  
ADMINISTRATION SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 70312.E9626

Date of Disbursement

/   /

Amount of Each Disbursement this Period

594.00

ADMINISTRATION SERVICE

**SUBTOTAL** of Disbursements This Page (optional) .....

3804.49

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 25 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

## **A. Coss Castle Self-Storage**

Mailing Address 39 Old Colony Ave.

City  
Boston

State  
MA

Zip Code  
02127-

Purpose of Disbursement  
STORAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70312.E9622

Date of Disbursement

03 / 05 / 2007

Amount of Each Disbursement this Period

329.00

STORAGE

Full Name (Last, First, Middle Initial)

## **B. Conference Call Conference Call.**

Mailing Address 1445 MacArthur Dr.  
Suite 214

City  
Carrollton

State  
TX

Zip Code  
75007-

Purpose of Disbursement  
CONFERENCE CALL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70320.E9638

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

145.52

CONFERENCE CALL

Full Name (Last, First, Middle Initial)

## **C. Conference Call Conference Call.**

Mailing Address 1445 MacArthur Dr.  
Suite 214

City  
Carrollton

State  
TX

Zip Code  
75007-

Purpose of Disbursement  
CONFERENCE CALL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70409.E9666

Date of Disbursement

03 / 19 / 2007

Amount of Each Disbursement this Period

478.91

CONFERENCE CALL

**SUBTOTAL** of Disbursements This Page (optional) .....

953.43

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 26 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

**A.** CPMA, Inc.

Mailing Address 84 Prescott St.  
Suite 21

City Cambridge State MA Zip Code 02138-

Purpose of Disbursement  
POLITICAL CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70320.E9639

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

2000.00

POLITICAL CONSULTING

Full Name (Last, First, Middle Initial)

**B.** Hui Jojo Deng

Mailing Address 117 Beaconsfield Road

City Brookline State MA Zip Code 02445-

Purpose of Disbursement  
ACCOUNTING SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70312.E9624

Date of Disbursement

03 / 05 / 2007

Amount of Each Disbursement this Period

660.00

ACCOUNTING SERVICE

Full Name (Last, First, Middle Initial)

**C.** DirecTV DirecTV

Mailing Address PO Box 60036

City Los Angeles State CA Zip Code 90060-0036

Purpose of Disbursement  
CABLE SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70320.E9640

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

147.57

CABLE SERVICE

**SUBTOTAL** of Disbursements This Page (optional) .....

2807.57

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 27 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

**A.** Kirk Dobson

Mailing Address 1209 Boylston St.

City  
Boston

State  
MA

Zip Code  
02215-

Purpose of Disbursement  
REIMBURSEMENT FOR TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 70409.E9668

Date of Disbursement

/   /

Amount of Each Disbursement this Period

40.80

REIMBURSEMENT FOR TRAVEL

Full Name (Last, First, Middle Initial)

**B.** Federal Express (Fed Ex)

Mailing Address PO Box 371461

City  
Pittsburgh

State  
PA

Zip Code  
15250-

Purpose of Disbursement  
EXPRESS MAIL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 70312.E9623

Date of Disbursement

/   /

Amount of Each Disbursement this Period

105.28

EXPRESS MAIL

Full Name (Last, First, Middle Initial)

**C.** Fleet Bank

Mailing Address 100 Federal Street

City  
Boston

State  
MA

Zip Code  
02110-

Purpose of Disbursement  
BANK SERVICE CHARGES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 70419.E9695

Date of Disbursement

/   /

Amount of Each Disbursement this Period

295.50

BANK SERVICE CHARGES

**SUBTOTAL** of Disbursements This Page (optional) .....

441.58

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 28 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

**A.** Garage Government Center

Mailing Address 50 New Sudbury Street

City Boston State MA Zip Code 02114-

Purpose of Disbursement  
PARKING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70409.E9667

Date of Disbursement

03 / 19 / 2007

Amount of Each Disbursement this Period

1280.00

PARKING

Full Name (Last, First, Middle Initial)

**B.** HPH Inc. Harvard Pilgram Heal

Mailing Address 1200 Crown Colony Dr.

City Quincy State MA Zip Code 02169-

Purpose of Disbursement  
HEALTH INSURANCE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70409.E9677

Date of Disbursement

03 / 19 / 2007

Amount of Each Disbursement this Period

1462.05

HEALTH INSURANCE

Full Name (Last, First, Middle Initial)

**C.** Lyndsay Jones

Mailing Address 95 West Squantum St. #605

City North Quincy State MA Zip Code 02171-

Purpose of Disbursement  
REIMBURSEMENT FOR TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70312.E9625

Date of Disbursement

03 / 05 / 2007

Amount of Each Disbursement this Period

101.79

REIMBURSEMENT FOR TRAVEL

**SUBTOTAL** of Disbursements This Page (optional) .....

2843.84

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

**A.** Lexis-Nexis

Mailing Address PO Box 7247-7090

City Philadelphia State PA Zip Code 19170-

Purpose of Disbursement  
RESEARCH

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 70320.E9643

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

2500.00

RESEARCH

Full Name (Last, First, Middle Initial)

**B.** Lexis-Nexis

Mailing Address PO Box 7247-7090

City Philadelphia State PA Zip Code 19170-

Purpose of Disbursement  
RESEARCH

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 70409.E9669

Date of Disbursement

03 / 19 / 2007

Amount of Each Disbursement this Period

1250.00

RESEARCH

Full Name (Last, First, Middle Initial)

**C.** Communication, Inc. Majority

Mailing Address 274 Marconi Blvd. Suite 260

City Columbus State OH Zip Code 43215-

Purpose of Disbursement  
VOTER MAIL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 70320.E9644

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

2000.00

VOTER MAIL

**SUBTOTAL** of Disbursements This Page (optional) .....

5750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

## **A. Merchants Bankcard**

Mailing Address Fleet Bank  
100 Federal Street

City Boston State MA Zip Code 02110-

Purpose of Disbursement  
CREDIT CARD FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70419.E9693

Date of Disbursement

03 / 01 / 2007

Amount of Each Disbursement this Period

25.00

CREDIT CARD FEE

Full Name (Last, First, Middle Initial)

## **B. Merchants Bankcard**

Mailing Address Fleet Bank  
100 Federal Street

City Boston State MA Zip Code 02110-

Purpose of Disbursement  
CREDIT CARD FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70419.E9692

Date of Disbursement

03 / 01 / 2007

Amount of Each Disbursement this Period

162.35

CREDIT CARD FEE

Full Name (Last, First, Middle Initial)

## **C. Merchants Bankcard**

Mailing Address Fleet Bank  
100 Federal Street

City Boston State MA Zip Code 02110-

Purpose of Disbursement  
CREDIT CARD EQUIPMENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70419.E9694

Date of Disbursement

03 / 23 / 2007

Amount of Each Disbursement this Period

105.00

CREDIT CARD EQUIPMENT

**SUBTOTAL** of Disbursements This Page (optional) .....

292.35

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 31 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

**A.** mindShift Technologies, Inc.

Mailing Address PO Box 200105

City  
Pittsburgh

State  
PA

Zip Code  
15251-

Purpose of Disbursement  
COMPUTER NETWORK

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 70320.E9645

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

COMPUTER NETWORK

Full Name (Last, First, Middle Initial)

**B.** mindShift Technologies, Inc.

Mailing Address PO Box 200105

City  
Pittsburgh

State  
PA

Zip Code  
15251-

Purpose of Disbursement  
COMPUTER NETWORK

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 70409.E9670

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1552.00

COMPUTER NETWORK

Full Name (Last, First, Middle Initial)

**C.** Konica Minolta Business Systems

Mailing Address P.O. Box 7247-0322

City  
Philadelphia

State  
PA

Zip Code  
19170-0322

Purpose of Disbursement  
COPIER RENTAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 70320.E9642

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1066.17

COPIER RENTAL

**SUBTOTAL** of Disbursements This Page (optional) .....

5118.17

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

## **A. Ox-Eye Properties**

Mailing Address c/o Massey & Co.  
85 Merrimac Street

City Boston State MA Zip Code 02114-

Purpose of Disbursement  
RENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70409.E9678

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

3695.00

RENT

Full Name (Last, First, Middle Initial)

## **B. Paychex/InterPay**

Mailing Address PO Box 8295

City Boston State MA Zip Code 02266-

Purpose of Disbursement  
PAYROLL-TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70312.E9617

Date of Disbursement

03 / 08 / 2007

Amount of Each Disbursement this Period

5060.44

PAYROLL-TAXES

Full Name (Last, First, Middle Initial)

## **C. Paychex/InterPay**

Mailing Address PO Box 8295

City Boston State MA Zip Code 02266-

Purpose of Disbursement  
PAYROLL SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70312.E9618

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

126.22

PAYROLL SERVICE

**SUBTOTAL** of Disbursements This Page (optional) .....

8881.66

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 33 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

## **A. Paychex/InterPay**

Mailing Address PO Box 8295

City  
Boston

State  
MA

Zip Code  
02266-

Purpose of Disbursement  
PAYROLL SERVICE CHARGE-401 K

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70312.E9619

Date of Disbursement

03 / 16 / 2007

Amount of Each Disbursement this Period

155.00

PAYROLL SERVICE CHARGE-401 K

Full Name (Last, First, Middle Initial)

## **B. Paychex/InterPay**

Mailing Address PO Box 8295

City  
Boston

State  
MA

Zip Code  
02266-

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70409.E9663

Date of Disbursement

03 / 22 / 2007

Amount of Each Disbursement this Period

5359.88

PAYROLL TAXES

Full Name (Last, First, Middle Initial)

## **C. Poland Spring Poland Spring**

Mailing Address Processing Center  
PO Box 52271

City  
Phoenix

State  
AZ

Zip Code  
85072-

Purpose of Disbursement  
BOTTLE WATER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70312.E9627

Date of Disbursement

03 / 05 / 2007

Amount of Each Disbursement this Period

197.17

BOTTLE WATER

**SUBTOTAL** of Disbursements This Page (optional) .....

5712.05

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 34 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

**A.** Poland Spring Poland Spring

Mailing Address Processing Center  
PO Box 52271

City Phoenix State AZ Zip Code 85072-

Purpose of Disbursement  
BOTTLE WATER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70409.E9672

Date of Disbursement

03 / 19 / 2007

Amount of Each Disbursement this Period

75.03

BOTTLE WATER

Full Name (Last, First, Middle Initial)

**B.** Boston Postmaster

Mailing Address JW MCCORMACK STATION  
New Chardon Street

City Boston State MA Zip Code 02114-

Purpose of Disbursement  
POSTAGE-GENERAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70409.E9673

Date of Disbursement

03 / 19 / 2007

Amount of Each Disbursement this Period

390.00

POSTAGE-GENERAL

Full Name (Last, First, Middle Initial)

**C.** Mark Rowe

Mailing Address 216 W. Plain St.

City Wayland State MA Zip Code 01778-

Purpose of Disbursement  
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70320.E9653

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

1161.96

REIMBURSEMENT: SEE BELOW

**SUBTOTAL** of Disbursements This Page (optional) .....

1626.99

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 35 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

**A.** Pagliucas Ristorant

Mailing Address 14 Parmenter St.

City  
Boston

State  
MA

Zip Code  
02113-

Purpose of Disbursement  
M. ROWE REIMBURSEMENT FOR FOOD

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70320.E9656

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

238.15

**[MEMO ITEM]**

MEMO: M. ROWE REIMBURSEMENT FOR FOOD

Full Name (Last, First, Middle Initial)

**B.** Staples, Inc.

Mailing Address Staples Credit Plan  
Dept. 80 - 0088936796

City  
Des Moines

State  
IA

Zip Code  
50368-9020

Purpose of Disbursement  
M. ROWE REIMBURSEMENT FOR PRINTER INK

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70320.E9655

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

115.40

**[MEMO ITEM]**

MEMO: M. ROWE REIMBURSEMENT FOR PRINTER INK

Full Name (Last, First, Middle Initial)

**C.** Verizon Verizon Wireless

Mailing Address PO Box 5029

City  
Wallingford

State  
CT

Zip Code  
06492-

Purpose of Disbursement  
M. ROWE REIMBURSEMENT FOR PHONE CALLS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70320.E9654

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

635.42

**[MEMO ITEM]**

MEMO: M. ROWE REIMBURSEMENT FOR PHONE CALLS

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 36 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

## **A. SCM Associates**

Mailing Address Steve Meyers  
PO Box 720

City Jaffrey State NH Zip Code 03452-

Purpose of Disbursement  
DIRECT MAIL AND TELEMARKE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70312.E9629

Date of Disbursement

03 / 05 / 2007

Amount of Each Disbursement this Period

2211.78

DIRECT MAIL AND TELEMARKE-  
TING

Full Name (Last, First, Middle Initial)

## **B. SCM Associates**

Mailing Address Steve Meyers  
PO Box 720

City Jaffrey State NH Zip Code 03452-

Purpose of Disbursement  
DIRECT MAIL AND TELEMARKE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70320.E9646

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

4735.90

DIRECT MAIL AND TELEMARKE-  
TING

Full Name (Last, First, Middle Initial)

## **C. SCM Associates**

Mailing Address Steve Meyers  
PO Box 720

City Jaffrey State NH Zip Code 03452-

Purpose of Disbursement  
DIRECT MAIL AND TELEMARKE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70409.E9674

Date of Disbursement

03 / 19 / 2007

Amount of Each Disbursement this Period

4960.61

DIRECT MAIL AND TELEMARKE-  
TING

**SUBTOTAL** of Disbursements This Page (optional) .....

11908.29

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 37 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

## **A. SCM Associates**

Mailing Address Steve Meyers  
PO Box 720

City Jaffrey State NH Zip Code 03452-

Purpose of Disbursement  
DIRECT MAIL AND TELEMARKE-

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70419.E9691

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

1164.57

DIRECT MAIL AND TELEMARKE-  
TING

Full Name (Last, First, Middle Initial)

## **B. Staples, Inc.**

Mailing Address Staples Credit Plan  
Dept. 80 - 0088936796

City Des Moines State IA Zip Code 50368-9020

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70320.E9647

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

99.17

OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

## **C. News Service State House**

Mailing Address 568 Washington St. Suite 24

City Wellesley Hills State MA Zip Code 02181-

Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70312.E9630

Date of Disbursement

03 / 05 / 2007

Amount of Each Disbursement this Period

2496.00

SUBSCRIPTION

**SUBTOTAL** of Disbursements This Page (optional) .....

3759.74

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 38 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

**A.** T-Mobile T-Mobile

Mailing Address PO Box 790047

City  
Saint Louis

State  
MO

Zip Code  
63179-

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70409.E9675

Date of Disbursement

03 / 19 / 2007

Amount of Each Disbursement this Period

289.21

PHONE SERVICE

Full Name (Last, First, Middle Initial)

**B.** Verizon

Mailing Address P.O. Box 1

City  
Worcester

State  
MA

Zip Code  
01654-

Purpose of Disbursement  
PHONE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70320.E9650

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

415.46

PHONE

Full Name (Last, First, Middle Initial)

**C.** Verizon

Mailing Address P.O. Box 1

City  
Worcester

State  
MA

Zip Code  
01654-

Purpose of Disbursement  
PHONE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70409.E9676

Date of Disbursement

03 / 19 / 2007

Amount of Each Disbursement this Period

435.21

PHONE

**SUBTOTAL** of Disbursements This Page (optional) .....

1139.88

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 39 / 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

**A.** Verizon- Verizon Internet Ser

Mailing Address PO Box 101096

City  
Atlanta

State  
GA

Zip Code  
30392-

Purpose of Disbursement  
INTERNET SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 70320.E9651

Date of Disbursement

/   /

Amount of Each Disbursement this Period

767.62

INTERNET SERVICES

**SUBTOTAL** of Disbursements This Page (optional) .....

767.62

**TOTAL** This Period (last page this line number only) .....

55807.66

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 40 / 45

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

**A.** Mass Republican State Committee

Mailing Address 85 Merrimac Street  
Suite 400

City Boston State MA Zip Code 02114-

Purpose of Disbursement  
KEVIN LANDRY TRANSFER OF EXCESS CONTRIB

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70409.E9664

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5000.00

**TOTAL** This Period (last page this line number only) .....

5000.00



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 41 / 45

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

**A.** Kirk Dobson

Mailing Address 1209 Boylston St.

City  
Boston

State  
MA

Zip Code  
02215-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 70409.E9658

Date of Disbursement

/   /

Amount of Each Disbursement this Period

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Brian Dodge

Mailing Address 10 Parker Road

City  
Groveland

State  
MA

Zip Code  
01834-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 70312.E9612

Date of Disbursement

/   /

Amount of Each Disbursement this Period

PAYROLL

Full Name (Last, First, Middle Initial)

**C.** Brian Dodge

Mailing Address 10 Parker Road

City  
Groveland

State  
MA

Zip Code  
01834-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 70409.E9659

Date of Disbursement

/   /

Amount of Each Disbursement this Period

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

**4662.23**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 42 / 45

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

**A.** Bruce Harrison

Mailing Address 101 Elm St

City  
Wakefield

State  
MA

Zip Code  
01880-

Purpose of Disbursement  
PAYROLL-ADMINISTRATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 70312.E9621

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

PAYROLL-ADMINISTRATION

Full Name (Last, First, Middle Initial)

**B.** Lyndsay Jones

Mailing Address 95 West Squantum St. #605

City  
North Quincy

State  
MA

Zip Code  
02171-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 70312.E9613

Date of Disbursement

/   /

Amount of Each Disbursement this Period

974.76

PAYROLL

Full Name (Last, First, Middle Initial)

**C.** Lyndsay Jones

Mailing Address 95 West Squantum St. #605

City  
North Quincy

State  
MA

Zip Code  
02171-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 70409.E9660

Date of Disbursement

/   /

Amount of Each Disbursement this Period

974.76

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

2949.52

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 43 / 45

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

**A.** Ruth Rice

Mailing Address 30 Fernview Apt 1

City  
North Andover

State  
MA

Zip Code  
01845-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 70312.E9614

Date of Disbursement

/   /

Amount of Each Disbursement this Period

447.66

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Peter Torkildsen

Mailing Address 1 Stony Brook Road

City  
Chelmsford

State  
MA

Zip Code  
01863-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 70312.E9615

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3476.21

PAYROLL

Full Name (Last, First, Middle Initial)

**C.** Peter Torkildsen

Mailing Address 1 Stony Brook Road

City  
Chelmsford

State  
MA

Zip Code  
01863-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 70409.E9661

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3703.35

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

7627.22

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 44 / 45

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

**A.** Robert Willington

Mailing Address 12 Arlington Street

City  
Reading

State  
MA

Zip Code  
01867-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 70312.E9616

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1236.59

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Robert Willington

Mailing Address 12 Arlington Street

City  
Reading

State  
MA

Zip Code  
01867-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 70409.E9662

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1236.59

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

2473.18

**TOTAL** This Period (last page this line number only) .....

17712.15

Form/Schedule: **F3XN**

Transaction ID: **C00042622**

ALL ACTIVITY WAS SOLELY RELATED TO MASS.REPUBLICAN PARTY ACTIVITY. NO ACTIVITY INVOLVED ANY FEDERAL CANDIDATE. NO MAILINGS OR OTHER ACTIVITY MENTIONED ANY OTHER FEDERAL CANDIDATE. NO ACTIVITY IS REQUIRED TO BE REPORTED ON SCHEDULES B, E, OR F. All donors who have contributed \$200 or more were sent a letter within 30 days asking for employer-occupation if one was not provided in order to meet best efforts policy. \*\*\* Ladd Moore- offset to operations -\$324.83- was for COBRA health-insurance coverage reimbursement (paid to Harvard Pilgrim Healthcare) for former employee \*\* \*\*\* Brandon Barber - offset to operations -\$649.66- was for COBRA health-insurance coverage reimbursement (paid to Harvard Pilgrim Healthcare) for former employee \*\* \*\*\* Priscilla Ruzzo - offset to operations -\$649.66- was for COBRA health-insurance coverage reimbursement (paid to Harvard Pilgrim Healthcare) for former employee \*\* \*\*\* Jinara Reyes - offset to operations -\$324.83- was for COBRA health-insurance coverage reimbursement (paid to Harvard Pilgrim Healthcare) for former employee \*\*